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	PTO/SB/21 (6-98)	# · •.	Application Number	09/625,107	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	FERANSMITTAL	Filing Date	April 3, 2001	1/2	
/	D %/EODM		First Named Inventor	Crawford, Peter J.	,
	WAR 2 4 2003 Ell Correspondence after initial			Jorgensen, Leland R.	
V	,		Examiner Name	2675	
1	TOTAL Number of Pages in This Submission	28	Attorney Docket No.	0975-003	

ENCLOSURES (check all that apply)									
Fee Transmittal For	n	Assignme	After Allowance Communication to Group			ation			
Fee Attached		Drawing(s	Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group						
Amendment / Respo	onse	Licensing							
After Final		Petition Real Accor	(Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Additional Enclosure(s) (please identify below): Form PTO/SB/06 Check for \$69.00 Return Receipt Postcard						
Affidavits/decla	ration(s)	Petition to							
Extension of Time R	lequest	Power of Change of Address							
Express Abandonmo	ent Request	Terminal				card			
Information Disclosu	ıre Statement	Small Ent			-				
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Response to Missing	n Parts/	MAR 3 1 2003 Technology Center 260							
Incomplete Applicati	-					2600			
Response to M Parts under 37 1.52 or 1.53	-								
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm or Individual name K	evin E.	Flynn	37,	325					
Signature	D.	Fly	Date	M	arch /3,	2003			
CERTIFICATE OF MAILING									
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:									
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Signature	Ky	nette	M. Baily	w	Date	March /	£2003		

/

PTO/SB/17 (01-03)

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for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)69.00

Name (Print/Type)

Signature

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Complete if Known					
Application Number	09/825.107				
Filing Date	April 3, 2001				
First Named Inventor	Crawford, Peter J.				
Examiner Name	Jorgensen, Leland R.				
Art Unit	2675				
Attornov Docket No.	0075 003 BECED				

METHOD OF PAYMENT (check all that apply)			FEI	E CALCULATION (continued)	MAR 3 1 200
X Check Credit card Money Other None	3. ADDIT	TIONA	L FEE	S	
Deposit Account:	Large Entity	Smal	I Entity	' Tecl	nnology Center
Deposit Deposit	Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Description	**
Account Number	1051 130		• • •	Surcharge - late filing fee or oath	Fee Paid
Deposit Account	1052 50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Commissioner is authorized to: (check all that apply)	1053 130	1053	130	Non-English specification	⊢
Charge fee(s) indicated below Credit any overpayments	1812 2,520	1812	2,520	For filing a request for ex parte reexamination	on
Charge any additional fee(s) during the pendency of this application	1804 920	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee	1805 1,840	1805	1,840*	Requesting publication of SIR after Examiner action	
to the above-identified deposit account.	1251 110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252 410	1			
1. BASIC FILING FEE Large Entity Small Entity	1253 930	1	465	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid	1254 1,450	2254	725	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 750 2001 375 Utility filing fee	1255 1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401 320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402 320	2402		Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403 280	2403	3 140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0.00	1452 110	2452	2 55	Petition to revive - unavoidable	
	1453 1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,300	2501	650	Utility issue fee (or reissue)	
Extra Claims below Fee Pald	1502 470	2502	235	Design issue fee	
Total Claims20** = X =	1503 630	2503	315	5 Plant issue fee	
Claims	1460 130	1460	130	Petitions to the Commissioner	
	1807 50	180	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Description	1806 180	180		Submission of Information Disclosure Stmt	<u> </u>
Code (\$) Code (\$)	8021 40	802	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809 750	280	9 375	Filing a submission after final rejection	
1201 84 2201 42 Independent claims in excess of 3				(37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810 750	281	0 375	5 For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent	1801 750			5 Request for Continued Examination (RCE)
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 90	1		of a design application	
SUBTOTAL (2) (\$) 0.00				a Claim Fees	169.00
**or number previously paid, if greater; For Reissues, see above	*Reduced l	oy Basic	Filing F	Fee Paid SUBTOTAL (3) (\$)	69.00
SUBMITTED BY				(Complete (if applicable)	

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(Attorney/Agent)

37,325

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Date

919 544

March

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

PTO/SB/06 (08-00)
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Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 0975-003/ 09/825,107 OTHER THAN CLAIMS AS FILED - PART I **SMALL ENTITY** OR SMALL ENTITY (Column 2) (Column 1) **FOR** NUMBER FILED **NUMBER EXTRA RATE FEE** RATE FEE BASIC FEE OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS 2 22 minus 20 = (37 CFR 1.16(c)) OR INDEPENDENT CLAIMS minus 3 = 1 OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL OR **TOTAL** * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN **CLAIMS AS AMENDED - PART II** OR **SMALL ENTITY** SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT PAID FOR OR Total Minus 25 22 3 (<u>\$_9</u> = 27.00 (37 CFR 1.16(c)) OR Independent Minus = 5 4 1 x <u>42</u>= 42.00 (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR **TOTAL** TOTAL OR 69.00 ADDIT. FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER **RATE** TIONAL TIONAL **RATE AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) = Minus OR *** Independent Minus = (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL **TOTAL** OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER RATE TIONAL AMENDMENT RATE TIONAL **AFTER PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT PAID FOR Total (37 CFR 1.16(c)) OR ** Minus = OR Independent Minus OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT, FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".